

# DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

PAGE 1 OF 2

ATTORNEY'S DOCKET NO.  
A-0104

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled C-erbB-2 External Domain: GP75

the specification of which

(check one) ☐ is attached hereto.

☒ was filed on August 4, 1989

Application Serial No. 077389,920

and was amended on \_\_\_\_\_

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

## PRIOR FOREIGN APPLICATION(S)

APPLICATION NUMBER	COUNTRY	DAY/MONTH/YEAR FILED	PRIORITY CLAIMED	
			YES	NO
<u>1-1</u>				
<u>1-1</u>				
<u>1-1</u>				

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NO.	FILING DATE	STATUS - PATENTED, PENDING, ABANDONED
APPLICATION SERIAL NO.	FILING DATE	STATUS - PATENTED, PENDING, ABANDONED

The following is hereby appointed as representative(s) to prosecute this application and transact all business in the Patent Office connected therewith:

NAME <u>Karen Babyak Dow</u>	ATTORNEY/AGENT <u>Attorney</u>	REGISTRATION NUMBER <u>29,684</u>	TELEPHONE NUMBER <u>(415) 769-5360</u>
NAME <u>Al A. Jecminek</u>	ATTORNEY/AGENT <u>Attorney</u>	REGISTRATION NUMBER <u>26,286</u>	TELEPHONE NUMBER <u>(415) 769-5203</u>
NAME _____	ATTORNEY/AGENT _____	REGISTRATION NUMBER _____	TELEPHONE NUMBER _____

SEND CORRESPONDENCE TO:

NAME) Karen Babyak Dow

c/o Triton Biosciences Inc.  
Patents and Licensing  
1501 Harbor Bay Parkway  
Alameda, California 94501

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR Susan G. Stuart	
INVENTOR'S SIGNATURE <i>S. Stuart</i>	
RESIDENCE	DATE SIGNED 29 August 1989
1256 Birch Street, Montara, CA 94037	
POST OFFICE ADDRESS	CITIZENSHIP U.S.
as above	

FULL NAME OF SECOND JOINT INVENTOR, IF ANY	
SECOND INVENTOR'S SIGNATURE	
RESIDENCE	DATE SIGNED
<input type="checkbox"/>	CITIZENSHIP
POST OFFICE ADDRESS	

FULL NAME OF THIRD JOINT INVENTOR, IF ANY	
THIRD INVENTOR'S SIGNATURE	
RESIDENCE	DATE SIGNED
<input type="checkbox"/>	CITIZENSHIP
POST OFFICE ADDRESS	

FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	
FOURTH INVENTOR'S SIGNATURE	
RESIDENCE	DATE SIGNED
<input type="checkbox"/>	CITIZENSHIP
POST OFFICE ADDRESS	

FULL NAME OF FIFTH JOINT INVENTOR, IF ANY	
FIFTH INVENTOR'S SIGNATURE	
RESIDENCE	DATE SIGNED
<input type="checkbox"/>	CITIZENSHIP
POST OFFICE ADDRESS	

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FULL NAME OF SOLE OR FIRST INVENTOR Susan G. Stuart	
INVENTOR'S SIGNATURE	
RESIDENCE 1256 Birch Street, Montara, CA 94037	DATE SIGNED Aug 4 1989
POST OFFICE ADDRESS as above	CITIZENSHIP U.S.

FULL NAME OF SECOND JOINT INVENTOR, IF ANY John J. Monahan	
SECOND INVENTOR'S SIGNATURE	
RESIDENCE 19 Tarabrook Drive, Orinda, CA 94563	DATE SIGNED Aug 4 1989
POST OFFICE ADDRESS as above	CITIZENSHIP U.S.

FULL NAME OF THIRD JOINT INVENTOR, IF ANY Beatrice Claudia Langton	
THIRD INVENTOR'S SIGNATURE	
RESIDENCE 111 Amigo Lane, Walnut Creek, CA 94596	DATE SIGNED Aug 4 1989
POST OFFICE ADDRESS as above	CITIZENSHIP Canada

FULL NAME OF FOURTH JOINT INVENTOR, IF ANY Miriam E. C. Hancock	
FOURTH INVENTOR'S SIGNATURE	
RESIDENCE 717 Carlston Avenue, Oakland, CA 94610	DATE SIGNED Aug 4 1989
POST OFFICE ADDRESS as above	CITIZENSHIP U.S.

FULL NAME OF FIFTH JOINT INVENTOR, IF ANY Lorraine A. Chao	
FIFTH INVENTOR'S SIGNATURE	
RESIDENCE 355 Serrano Drive #6F, San Francisco, CA 94132	DATE SIGNED Aug 4 1989
POST OFFICE ADDRESS as above	CITIZENSHIP U.S.

Full Name of Sixth Joint Inventor, If Any:

Peter Bluford	
Sixth Inventor's Signature	
RESIDENCE 5319 Conestoga Way, Richmond, CA 94803	DATE SIGNED Aug 4 1989
POST OFFICE ADDRESS As above	CITIZENSHIP U.S.

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☐ was filed on \_\_\_\_\_ as  
Application Serial No. \_\_\_\_\_  
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NAME	ATTORNEY/AGENT	REGISTRATION NUMBER	TELEPHONE NUMBER
Al A. Jecminek	Attorney	26,286	(415) 769-5203
NAME	ATTORNEY/AGENT	REGISTRATION NUMBER	TELEPHONE NUMBER

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